BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

1040659-991101

CLAIMS AS			S FILED - (Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			10					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			/ minus 20=		• 0			X\$ 9=	0	OR	X\$18=	
INDEPENDENT CLAIMS			g mi	nus 3 =	0			X40=	0	OR	X80=	
MULTIPLE DEPENDENT CLAIM PI			RESENT					+135=	· · ·	OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	i	TOTAL	355	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	
		(Column 1)		(Colu		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	C AIN	=		X40=		OR	X80=	
L	rinot rhese	NIATION OF MI	OLITE DEF	ENDEN	CLANI		' [+135=	·	OR	+270=	
							L	TOTAL		OR	TOTAL	
		(0.1		(0.1	•	(0.1	P	ADDIT. FEE		1011	ADDIT. FEE	<u> </u>
		(Column 1) CLAIMS		(Colui		(Column 3)	1 -					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	=	RATE	ADDI- TIONAL FEE
	Total	*	Minus .	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JLIIPLE DEF	ENDEN	CLAIM		ין וי	+135=		OR	+270=	*
		L	TOTAL		OR	TOTAL						
								DDIT. FEE		0.1	ADDIT. FEE	
	हरता है। इंजुल्ड करा	(Column 1) CLAIMS		(Colui		(Column 3)	1 _					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	$\prod_{i \in I} f_i$	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	╽┟	X40=		OR	X80=	
Ļ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM		! -	+135=		OR	+270=	e.
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										l	TOTAL	
	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	ADDIT. FEE	11
	The "Highest Nun	nber Previously Pa	id For" (Total o	r Independ	ent) is the	highest numbe	er four	nd in the app	ropriate box	in col	umn 1.	